

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)**

SERIAL NO. 331,042 FILING DATE 12-16-81
 APPLICANT(S) Charles D. Jale

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT								
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1				51		1				
2		1		1			52		1				
3		1		1			53		1				
4		1		1			54		1				
5		1		1			55		1				
6		1		1			56		1				
7		1		1			57		1				
8		4		3			58		1				
9		4		3			59		1				
10		4		3			60		1				
11		4		3			61		1				
12		4		3			62		1				
13		4		3			63						
14		5		4			64						
15		5		4			65						
16		5		4			66						
17		7		7			67						
18		7		7			68						
19		7		7			69						
20		1		1			70						
21		1		1			71						
22		1		1			72						
23		1		1			73						
24	1		1				74						
25		1		1			75						
26		1		1			76						
27		1		1			77						
28		1		1			78						
29		1		1			79						
30		1		1			80						
31		1		1			81						
32		1		1			82						
33		1		1			83						
34		1		1			84						
35		1		1			85						
36		1		1			86						
37		13		13			87						
38		13		13			88						
39		13		13			89						
40		13		13			90						
41		13		13			91						
42		13		13			92						
43		13		13			93						
44		13		13			94						
45		13		13			95						
46		13		13			96						
47		13		13			97						
48	1		1				98						
49		1		1			99						
50		1		1			100						
TOTAL IND.							TOTAL IND.	3		3			
TOTAL DEP.							TOTAL DEP.	239		230			
TOTAL CLAIMS							TOTAL CLAIMS	242		233			